t Resolution

Institution:

To be completed by inmate. Forward the white Canary & Goldenrod copies to the supervisor of the staff person or department most responsible for complaint. Forward Pink copy to the Inspector.

Inmate's Name:		Number:	Hous	ing Assignment:
Complaint Regard	lino.			Submitted:
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		Mapan po	71	ecoporant .

Action Taken (Cite appropriate policy, procedure or regulation in response).: At the time of this response, you are a medical impatient in the Infirmary; therefore, you are certainly receiving medical

Staff Member's Signature and Title:	25		Date	• · · · · · · · · · · · · · · · · · · ·	in a second seco
	31	Della.	DWSS	12-4-00	

Complaints not resolved may be addressed in accordance with 5120-9-31.

1990 Harmon Ave., Columbus OH 43223-0658 (614)445-5960 Radiology: ext. 2734 05/11/2001

WATLEY

A347921

SOCF

293825

LUMBAR SPINE

05/10/2001

THREE VIEWS: Five lumbar type vertebrae are noted. The disc spaces and vertebral body heights are well maintained. I see no abnormalities within the posterior elements. There is a metallic structure overlying the right lower quadrant. This appears to be within the occum. This has an appearance of an ingested razor blade. This requires close follow up. No additional abnormalities are seen.

CONCLUSION: (1) Negative lumbar spine. (2) Metallic density in the right lower quadrant. This appears to be a razor blade within the cocum-

*RESULTS WERE CALLED TO THE INSTITUTION THE DAY THE FILMS WERE READ.

plainted that

DV 5/15/01

Twilliam E. M. Fenness

William B. McLemore, M.D.

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05/11/2001

electronically signed

1990 Harmon Ave., Columbus OH 43223-0658 (614)445-5960 Radiology: ext. 2734 12/01/2000

WATLEY

A347921

435166 SOCF

ABDOMEN FLAT & UP

11/29/2000

SUPINE VIEWS OF THE ABDOMEN

Two films are included. There is a clipical history of swallowing a foreign body (razor blade). There are several radiopaque foreign bodies in the left upper quadrant projecting slightly lateral to the gas shadow in the mid body of the stomach. These appear to lie in the proximal small bowel or possibly the upper left colon. The first metallic foreign body is an elongated metallic density which may represent a portion of a razor blade measuring 3.2 cm in length and 0.4 cm in width. The second group of metallic foreign bodies is immediately inferior to this and appears to represent a group of 2-3 metallic staples clustered together. The bowel gas pattern is normal. No free air or acute complication is seen.

S. Douglas Hear, M.a.

S. Douglas Hass, M.D.

ksf

11/30/2000

electronically signed

1990 Harmon Ave., Columbus OH 43223-0658 (614)445-5960 Radiology: ext. 2734 12/06/2000

WATLEY

A347921

SOCF

348686

ABDOMEN SINGLE AP

12/04/2000

There is a clinical history of swallowing a razor blade.

A rectangular metallic foreign body projects over the right lower quadrant in the area of the cecum or distal small bowel. The foreign body measures 3 cm. in length and 5-6 mm. in greatest width and is consistent with a segment of razor blader. The bowel gas pattern is normal. There is gas and stool in the colon poripherally. No acute complication is seen.

South for own 2.8.00

S. Douglas Heas, M.Q.

S. Douglas Hass, M.D.

ijу

12/05/2000

electronically signed

1990 Harmon Ave., Columbus OH 43223-0658 (614)445-5960 Radiology: ext. 2734 9/4/2001

WATLEY

A347921

SOCF

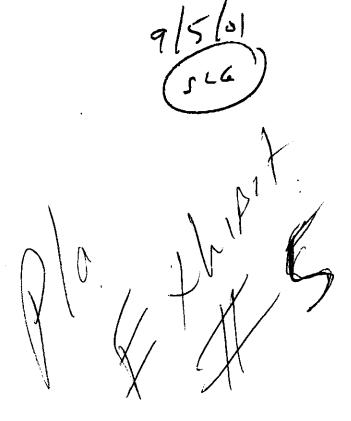
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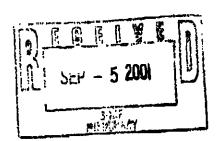
CHEST

8/27/2001

PA CHEST:

The heart size is normal and the lungs are clear. No foreign body is seen.





S. Douglas Haas, M.D.

S. Douglas Hass, M.D.

ijУ

8/31/2001

electronically signed

yfessional radiology services by Mid-Ohio Radiology,



July 9, 2002

Martin O. Akusoba, M.D. 1990 Harmon Avenus Columbus, Ohio 43223

Re: Rayshan Watley 906-36-3475

University Hospitals

410 West Tenth Avenue Columbus, OH 43210 Phone (614) 293-8000

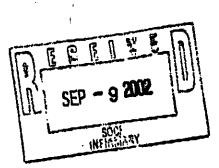
347.921 247.921

Arthur G. James Cancer Hospital and Richard J. Solove Research Institute

300 West Tenth Avenue Columbus, OH 43210 Phone: (614) 293-3300

University Hospitals East

1492 East Broad Street Columbus, OH 43205 Phone: (614) 257-3000



Dear Dr. Akusoba:

I saw Mr. Watley in followup in the TeleMedicine Clinic at OSU. This is a gentleman that has been experiencing low back pain with radiation into the left lower extremities since 1999. He has previously undergone epidural steroid injections which have not resulted in any meaningful amelioration in his present symptoms. His last MRI was in August of 2001, and it demonstrated a very small disc protrusion at the L4-5 level without significant canal compromise or neural foramina compromise. I believe that the best method of treatment in this case would be with epidural injections for symptomatic relief.

His neurological examination on today's assessment is normal.

I have also ordered a repeat MRI of the lumbar spine without gadolinium to further assess for any changes that may be anatomically detectable on imaging studies.

. Sincerely,

Dongwoo John Chang, M.D., FRCSC Assistant Professor of Neurological Surgery The Ohio State University College of Medicine



The Opio State University Hospitals / Arthur G. James Cencer Hospital and Richard J. Solove Research Institute College of Medicine and Public Health / OSU & Harding Behavioral Healthcare and Medicine

SION OF THE CHIEF INSPECTO

ON A GRIEVANCE APPEAL

NAME:	RAYSHAN WATLEY	INSTITUTION:	SOCF
NUMBER:	347-921	GRIEVANCE NUMBER(S):	01-01-44
DATE:	MARCH 2, 2001		

The office of the Chief Inspector is in receipt of your notification of grievance, the disposition of that grievance, and your appeal to this office. A review of your appeal has been completed. The decision of the Inspector is hereby MODIFIED in part for additional investigation.

In your complaint, you state that you signed up for sick call because the nerve damage in your lower back causes your leg to give out. You feel that you should be referred to the doctor. You feel that you are being denied medical attention. You want to see the doctor within the next week.

In response to your complaint, the Assistant Institutional Inspector contacted Ms. Hardin, as she is the individual who schedules all MRT's to special clinics. You were scheduled for the EMG and Physical Therapy clinics on 1/23/01. The Assistant Institutional Inspector stated that she was confident that your medical concerns would be addressed by the physician at The Ohio State University.

In your appeal to this office, you reiterate your complaint in its entirety. You add in your appeal dated 1/26/01 that you were seen at ortho and EMG about damage to your elbow not your back. You state that you have not been to physical therapy. You again contend that you are not receiving medical attention for complaints regarding your back.

Upon review of all information provided, it appears to this office that you are receiving medical care however it is not clear if this care has been for your back or for other physical problems. Accordingly by copy of this appeal response the Institutional Inspector's Office is directed to revisit this Issue to discern if the care provided on 1/23/01 was for your back and if not to conduct additional investigation to discern what medical attention you have received related to your back. The results of this additional investigation or inquiry are to be communicated to you and to this office on a supplemental disposition of grievance. If you are still dissatisfied after you have received the supplemental response, you may again at that time appeal the matter to this office.

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This office will take no further action in regards to this matter at this time.

Inspector of Institutional Services

Dr. Bruce Martin, Medical Director

Case 1:01-cv-00739-2 FC1150N OT-1115-CHIF INSPECTOR /05/2004 Page 8 of 15

ON A GRIEVANCE APPEAL

•			
NAME:	RAYSHAN WATLEY	INSTITUTION:	SOCF
NUMBER: _	347- 9 21	GRIEVANCE NUMBER (S):	02-03-018
DATE:	PEBRUARY 26, 2003		
rievance, and y	ne Chief Inspector is in receipt of your appeal to this office. A review hersby modified with no addition	of your appeal has been completed.	sposition of that The decision of
aving with you or your eyes.	nt you state that you have tried seven ir eyes but Nurse Reeder told you that You indicate that the eye doctor callurse Reeder cannot deny you medicate	et she is not going to allow you to sig Innot help you, as the issue does not	n up for sick call involve glasses.
hysician on nu lieged that bie	the Inspector stated that you have i merous occasions. No problem with each was thrown in your eyes occum to the doctor for a problem that they s	your eyes was ever noted. The incided months ago. Medical will not con	lent in which you
or sick cell abo or your eyes. "formal compla	to this office you contend that the sid out your eyes. You claim that you ha That is why you allege that no probl aint with the Health Care Administrat about your eyes.	eve not been seen at nurse's sick call lems with your eyes were noted. W	or by the doctor hen you filed an
1/18/02 regan	i complaint response of 2/4/03, Ms. ding your eyes. The doctor determine kite the eye clinic if vision is a problem	ed that no treatment was needed. A	s such, Ms. Parks
	-01, Medical Provisions, states in part, est for attendance at sick call."	, "No member of the correctional staff	f shall disapprove
ater at nurse's ndicated, that ' lean and prop nodified. Howe	w up with SOCF revealed that Inmate sick call. As such, the nurse is aware they want to be seen. In accordance erly assessed the co-payment chargever, as stated by Ms. Parks, HCA, you regarding this matter has been refeated response.	e of the inmate's request at that time is with policy, if you sign up for sick calge. As such, that part of the Inspect ou may wish to kite the eye clinic if vis	and the reason, if Il then you will be itor's response is iton is a problem.
No further actic	on will be taken in regard to this appe	eal at this time.	
•		HOCove	l
		L.C. COVAL, ASSISTANT CH	EF INSPECTOR
·	of Englishional Services	CATO PA	A CONTRACTOR
	prectional Henithcare	Olainet	177
File		W/D//19/	779

Page 9 of 15

Informal Complaint Resolution

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Institution:	-			
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	2600			

To be completed by inmate. Forward the white, Canary & Goldenrod copies to the supervisor of the staff person or department most responsible for complaint. Forward Pink copy to the Inspector.

Submitted To:	Port 1-3	1	Date Submitted:	9-12-9
Inmater's Name Workey	Number 3c	121	Housing Assignment:	5-3-42
Complaint Regarding:	103 Schelen	iold for	501294124	i on
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To be completed by the supervisor of the staff person or department (respondent) most responsible for complaint. Return Canary copy to inmate within 5 working days. Send white copy to the Inspector and keep Goldenrod copy.

Augus	ropriate policy, procedure or WACI	Miss in M	11-051-	las not
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Staff Member's Signature and Title	Harks R	When the	Huggon 180	attack.
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Complaints not resolved may be addressed in accordance with

Informal Complaint Resolution

			_
Institution:	500	1-	
	JUL	ۃ	1.1

Top section to be completed by inmate, within 14 days of incident.

Inmate will forward the White & Canary copies to the supervisor of the staff person or department most responsible for complaint; Forward Pink copy to the Inspector; and keep the Goldenrod copy.

Submitted To: 5 Pub Dillion	₁₁ ,2	Date Submitted: 4-2/52
Inmate's Name: Watte!	Number: 3/7.47/	Housing Assignment: K7-15
Complaint Regarding:	Ber Asitus	g over a year
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edate going there	Pain and	humbness IN
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Pumshment		
A CONTRACTOR		
in Arl an		
	FEGE	VEN
XX 10	APR 2	3 2002
		50
	DEPUTY WARDEN OF	SPECIAL SERVICES

Lower Section to be completed by the supervisor of the staff person or department most responsible for complaint.

Return Canary copy to inmate within 7 calendar days. Send White copy to the Inspector.

Action Taken (Cite appropriate policy, procedure or regulation in response):

According to Medical, you were sent to the hand clinic 5-11-01 for left ulnar sublumation of a nerve and a splint was ordered. You were seen again 5-24-01 and surgery was "scheduled for June", however, for some unknown reason at did not get scheduled. You were sent back to the clinic again 10-25-01. H & P was done. You were seen by ortho. 11-2-01 for back pain and given epidural shots for same. Still surgery not done. You were sent back and seen by hand clinic 2-7-02 and again placed on list for surgery. The HCA indicates you've been sent back repeatedly and remain on the monthly list to CMC for "pending surgery". There've also been nemerous trips for back injections, derm. with all the above. It was also noted that your eating remore blades and slipping cuffs hasn't helped your situation.

Staff Member's Signature and Title: Date: 5_3_02	
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Complaints not resolved may be addressed in accordance with 5120-9-31.

Informal Complaint Resolution

Institution:

To be completed by inmate. Forward the white, Canary & Goldenrod copies to the supervisor of the staff person or department most responsible for complaint. Forward Pink copy to the Inspector.

Inmate's Name: Library Received House Some medication of the Recipied to the R	ber and I J sepa ste
Complaint Regarding: He Doctoll et Cw 10 Some medication to the doctor end lectered to p. 2-28 00 some Doctors and le the order of MAR domage in my plbow	ber and I J sepa ste
some Ductors and to the orders	J seen ste
Per domoge in my olpow	the medication
donoge in my olpow	and os of
-2-01 I still have not love	
	my medicoti
don't know why wood prose	6 Dog O
this medical staff is Apring to	
// / / JAN - 3 2001	
To be completed by the supervisor of the staff person or department (respondent Return Canary copy to inmate within 5 working days. Send white copy to the In	t) most responsible for complaint.

Action Taken (Cite appropriate policy, procedure or regulation in response):

Reportedly, the medication in emetion (Calabon) ordered 12-28-00 is not on our formulary. The doctor ordered an appropriate substitute, Relater on 1-4-01, which

you should be receiving by now.

Staff	Mem	ber's	Signature	and	Title:

Date:

1-8-01

Informal Complaint Resolution

Institution: SocF

To be completed by inmate. Forward the white, Canary & Goldenrod copies to the supervisor of the staff person or department most responsible for complaint. Forward Pink copy to the Inspector.

Submitted To:	May A	45		Date Submitted:	1-18-00
Inmate's Name:	nesses for	Number: 24/7	921	Housing Assignment:	-1-6
Complaint Regardi	ه مد م سیس :ng	andre de	actobe	or 11	for donne
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	1"				

To be completed by the supervisor of the staff person of department (respondent) most responsible for complaint. Return Canary copy to inmate within 5 working days. Send white copy to the Inspector and keep Goldenrod copy.

Action Taken Cite appropria The physician indicated When	te policy, procedure or rec	ulaton in response).:	not modino	11.
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medically indi	cated		dedaji Mirosefi Versija komunikacija Versija komunikacija	
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Complaints not resolved may be addressed in accordance with 5120-9-31.

RESPONSE TO KITE

TO:

NAME RAYSHAN WATLEY

NUMBER <u>A347921</u>

LOCK / UNIT

YOUR KITE OF 01/04/2001

SUBJECT: CELEBREX

THIS MEDICATION WAS ORDERED FOR YOU BUT MUST BE REVIEWED BY THE DR. DUE TO IT IS A NON-

Changed to RelAFEN

RESPONSE TO KITE

TO:

NAME RAYSHAN WATLEY

NUMBER <u>A347921</u>

LOCK / UNIT

<u>J1</u> / 08

FROM:

PHARMACY

YOUR KITE OF 02/05/2001

SUBJECT: MEDICATION

IN OCTOBER YOU WERE ORDERED KELFLEX & DIPENHYDRAMINE. YOUR RELEFEN WAS ORDERED PER DR.NZEOGU.

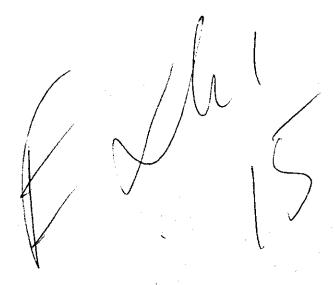
Case 1:01-cv-00739-SJD-TSB	Document 47-2 Filed 03/05/2004 Page 15 of 15	
DISPOSITION OF GRIEVANCE	GRIEVANCE CODE: IA3	
	RESOLUTION CODE: B6	
MATE:Rayshan WATLEY	INSTITUTION: SOCF	
e e e e e e e e e e e e e e e e e e e	GRIEVANCE NUMBER: 07-02-066	
JMBER: A34.7921	DATE: 7/29/2002	
The disposition of this grievance will be d	delayed longer than 14 calendar days for the following reason(s):	
on <u>07/29/2002</u>		
date		

J2-14

Your grievance states SOCF Medical department has denied you medications ordered by the OSU doctor. You state you are being denied the pain medication and antiflamatory medication ordered on July 25, 2002.

Southern Ohio Correctional Facility doctor has your file on his desk, for review of meds ordered on July 29, 2002. Upon review, he will determine what meds, if any, will be prescribed. OSU doctors only make recommendations; our doctor has the final say as to what meds will be prescribed.

Therefore, this office considers your grievance to be without merit and no further action will be taken.



If you wish, you may appeal this decision to the Chief Inspector within 14 calendar days. Appeal forms are available in the office of the Inspector of Institutional Services.

nspector of Institutional Services